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FROM: Mitchell K. McCarthy, Registration No. 38,794**TO:** Mail Stop AF
Commissioner for Patents
P. O. Box 1450
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| ADDRESSEE/ORGANIZATION | FAX NO. | TELEPHONE NO. |
|------------------------|--------------|---------------|
| Art Group 2182 | 571/273-8300 | 571/272-2600 |
| | | |

RE: Application No. 09/494,787
In re application of: John A. Mount
Assignee: Seagate Technology LLC
Dkt. No.: STL9274

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PATENT
Dkt. STL9274

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: **John A. Mount**
Assignee: **SEAGATE TECHNOLOGY LLC**
Application No.: **09/494,787** Group No.: **2182**
Filed: **January 31, 2000** Examiner: **Eron Sorrell**
For: **AUTOMATED REGISTER DATA TRANSFER RESPONSIVE TO ZONE TRANSITION
EVENTS IN A DISC DRIVE**

*RESPONSE UNDER
37 C.F.R. § 1.116
EXPEDITED PROCEDURE
EXAMINING GROUP*

Mail Stop AF
Commissioner for Patents
P.O. Box 1450
Alexandria, VA 22313-1450

AMENDMENT OR RESPONSE AFTER FINAL REJECTION—TRANSMITTAL

1. Transmitted herewith is an amendment after final rejection (37 C.F.R. § 1.116) for this application.

STATUS

2. Applicant is other than a small entity.

EXTENSION OF TERM

3. The proceedings herein are for a patent application and the provisions of 37 C.F.R. 1.136 apply. Applicant believes that no extension of term is required. However, this conditional petition is being made to provide for the possibility that applicant has inadvertently overlooked the need for a petition for extension of time.

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a)

I hereby certify that, on the date shown below, this correspondence is being:

TRANSMISSION

☒ facsimile transmitted to the Patent and Trademark Office, (571) 273 - 8300.


Signature

Date: December 27, 2005

Diana C. Anderson

(type or print name of person certifying)

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FEE FOR CLAIMS

4. The fee for claims (37 C.F.R. 1.16(b)-(d)) has been calculated as shown below:

| (Col.1) | (Col. 2) | (Col. 3) | OTHER THAN SMALL ENTITY | |
|--|--------------------------------------|------------------|-------------------------|---------------|
| CLAIMS REMAINING AFTER AMENDMENT | HIGHEST NO PREVIOUSLY PAID FOR | PRESENT EXTRA | RATE | ADDIT. FEE |
| TOTAL 20 MINUS | 20 | = 0x | \$ 50.00 = | \$ 0.00 |
| INDEP 4 MINUS | 4 | = 0 x | \$ 200.00 = | \$ 0 |
| FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM | | + | \$ 0.00 = | \$ 0.00 |
| | | | TOTAL | \$ 0.00 |
| | | | ADDIT. FEE | |

No additional fee for claims is required.

FEE DEFICIENCY

5. If any additional extension and/or fee is required, charge Account No. 06-0540.
If any additional fee for claims is required, charge Account No. 06-0540.

Respectfully submitted,

Date:

12/27/2005



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Randall K. McCarthy, Registration No. 39,297
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TRANSITION EVENTS IN A DISC DRIVE

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RESPONSE TO OFFICE ACTION MAILED OCTOBER 25, 2005

Sir:

This is a complete response to the Office Action of 10/25/2005.

Amendments to the Specification begin on page 2.

Listing of Claims are found on page 5.

Remarks begin on page 10.

CERTIFICATION UNDER 37 C.F.R. §§ 1.8(a)

I hereby certify that, on the date shown below, this correspondence is being:

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Signature

Date: December 27, 2005

Diana C. Anderson
(type or print name of person certifying)